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#### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### **Chapter 12:** Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by  $\S 342(b)$  of the Bankruptcy Code.

| Printed Name and title, if any, of Bankruptcy Petition Preparer<br>Address:                             | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of |
|---|---|
| X   | the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)   |
| Certificate of the Debtor I (We), the debtor(s), affirm that I (we) have received and read this notice. |   |

| Sassetti, Julienne Grace     | X /s/ Julienne Grace Sassetti      | 7/17/2009 |
|------------------------------|------------------------------------|-----------|
| Printed Name(s) of Debtor(s) | Signature of Debtor                | Date      |
| Case No. (if known)          | X                                  |           |
|                              | Signature of Joint Debtor (if any) | Date      |

| 2                            |  |
|------------------------------|--|
| 38-24241 - Forms Software On |  |
| Inc. [1-800-9                |  |
| © 1993-2005                  |  |

Entered 07/17/09 19:10:33 Desc Main Case 09-26014 Doc 1 Filed 07/17/09 Page 3 of 39 Document B22A (Official Form 22A) (Chapter 7) (12/08) According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement): ☐ The presumption arises **▼**The presumption does not arise In re: Sassetti, Julienne Grace ☐ The presumption is temporarily inapplicable. Case Number: \_ (If known)

#### CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

Part I. MILITARY AND NON-CONSUMER DEBTORS

| 1A | Disabled Veterans. If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  □ Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).   |
|----|--|
| 1B | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  |
|    | Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.   |
| 1C | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.    Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard    a.   I was called to active duty after September 11, 2001, for a period of at least 90 days and   I remain on active duty /or/   I was released from active duty on   , which is less than 540 days before this bankruptcy case was filed;    OR |
|    |  |

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|   | Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION  |  |                                  |                             |  |        |                         |                                |  |
|---|---|--|----------------------------------|-----------------------------|--|--------|-------------------------|--------------------------------|--|
|   | Mar   | ital/filing status. Check the box tha  | at applies and co                | omplete the                 | balance of this part of this                     | statem | ent as dire             | ected.                         |  |
|   | a. 🗹  | a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.   |                                  |                             |  |        |                         |                                |  |
|   | b. Married, not filing jointly, with declaration of separate households. By checking this b penalty of perjury: "My spouse and I are legally separated under applicable non-bankmare living apart other than for the purpose of evading the requirements of § 707(b)(2)(A Complete only Column A ("Debtor's Income") for Lines 3-11.  |  |                                  |                             |  |        | w or my sp              | pouse and I                    |  |
| 2 | c   | Married, not filing jointly, without Column A ("Debtor's Income")  |                                  |                             |  |        | ove. Con                | plete both                     |  |
|   | d. [  | Married, filing jointly. <b>Complete Lines 3-11.</b>   | ooth Column A                    | A ("Debtor                  | 's Income") and Column                           | B ("Sp | ouse's In               | come") for                     |  |
|   | the si  | igures must reflect average monthly ix calendar months prior to filing the h before the filing. If the amount of divide the six-month total by six, as | e bankruptcy ca<br>monthly incom | ase, ending<br>ne varied du | on the last day of the uring the six months, you | De     | umn A<br>btor's<br>come | Column B<br>Spouse's<br>Income |  |
| 3 | Gros  | ss wages, salary, tips, bonuses, ove   | ertime, commis                   | ssions.                     |  | \$     | 530.99                  | \$                             |  |
| 4 | Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. |  |                                  |                             |  |        |                         |                                |  |
| 4 | a.  | Gross receipts   |                                  | \$                          |  |        |                         |                                |  |
|   | b.  | Ordinary and necessary business e  | expenses                         | \$                          |  |        |                         |                                |  |
|   | c.  | Business income  |                                  | Subtract I                  | ine b from Line a                                | \$     |                         | \$                             |  |
| _ | diffe   | t and other real property income. rence in the appropriate column(s) of nclude any part of the operating of V.   | of Line 5. Do no                 | ot enter a n                | umber less than zero. <b>Do</b>                  |        |                         |                                |  |
| 5 | a.  | Gross receipts   |                                  | \$                          |  |        |                         |                                |  |
|   | b.  | Ordinary and necessary operating   | expenses                         | \$                          |  |        |                         |                                |  |
|   | c.  | Rent and other real property incor   | ne                               | Subtract I                  | ine b from Line a                                | \$     |                         | \$                             |  |
| 6 | Inte  | rest, dividends, and royalties.  |                                  |                             |  | \$     |                         | \$                             |  |
| 7 | Pens  | ion and retirement income.   |                                  |                             |  | \$     |                         | \$                             |  |
| 8 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.  |  |                                  |                             |  |        |                         | \$                             |  |
| 9 | <b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  |  |                                  |                             | d by you or your spouse                          |        |                         |                                |  |
|   | Unemployment compensation claimed to be a benefit under the Social Security Act  Debtor \$ Spouse \$  |  |                                  |                             |  | \$     | 616.67                  | \$                             |  |

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| (  | Ometai 1 om 2211) (Chapter 1) (12/00)   |                    |                     |      |           |
|----|---|--------------------|---------------------|------|-----------|
| 10 | Income from all other sources. Specify source and amount. If necessary, lissources on a separate page. Do not include alimony or separate maintenant paid by your spouse if Column B is completed, but include all other pay alimony or separate maintenance. Do not include any benefits received un Security Act or payments received as a victim of a war crime, crime against a victim of international or domestic terrorism.  [a. ] |                    |                     |      |           |
|    | b.  | \$                 |                     |      |           |
|    | Total and enter on Line 10  |                    | \$                  | \$   |           |
| 11 | Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).   |                    |                     |      |           |
| 12 | <b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been con Line 11, Column A to Line 11, Column B, and enter the total. If Column B to completed, enter the amount from Line 11, Column A.   |                    | \$                  |      | 1,147.66  |
|    | Part III. APPLICATION OF § 707(B)(7) E  | EXCLUSION          |                     |      |           |
| 13 | <b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount 12 and enter the result.  | nt from Line 12 by |                     | \$   | 13,771.92 |
| 14 | <b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  |                    |                     |      |           |
|    | a. Enter debtor's state of residence: <b>Illinois</b> b. Enter  | r debtor's househo | old size:1_         | \$   | 47,355.00 |
|    | <b>Application of Section707(b)(7).</b> Check the applicable box and proceed as   | directed.          | •                   |      |           |
| 15 | The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII.   |                    |                     |      |           |
|    | The amount on Line 13 is more than the amount on Line 14. Comple  | ete the remaining  | parts of this state | emen | ıt.       |
|    |   |                    |                     |      |           |

### Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

| Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)  |  |  |             |    |  |  |  |  |
|---|--|--|-------------|----|--|--|--|--|
| 16  | Ente   | r the amount from Line 12.   |             | \$ |  |  |  |  |
| Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. |  |  |             |    |  |  |  |  |
|   | a.   |  | \$          |    |  |  |  |  |
|   | b.   |  | \$          |    |  |  |  |  |
|   | c.   |  | \$          |    |  |  |  |  |
|   | Tot  | al and enter on Line 17.   | _           | \$ |  |  |  |  |
| 18  | 18 Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result. |  |             |    |  |  |  |  |
|   |  | Part V. CALCULATION OF DEDUCTIONS FROM INC   | OME         |    |  |  |  |  |
|   |  | Subpart A: Deductions under Standards of the Internal Revenue Se   | rvice (IRS) |    |  |  |  |  |
| 19A   | Natio  | onal Standards: food, clothing and other items. Enter in Line 19A the "Total" am anal Standards for Food, Clothing and Other Items for the applicable household size. allable at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) |             | \$ |  |  |  |  |

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| 19B  | National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.  |   |                     |         |   |                        |                    |    |
|------|--|---|---------------------|---------|---|------------------------|--------------------|----|
|      | Ho   | usehold members under 65 ye   | ears of age         | Hou     | sehold memb                             | ers 65 years of        | age or older       |    |
|      | a1.  | Allowance per member  |                     | a2.     | Allowance p                             | er member              |                    |    |
|      | b1.  | Number of members   |                     | b2.     | Number of 1                             | nembers                |                    |    |
|      | c1.  | Subtotal  |                     | c2.     | Subtotal                                |                        |                    | \$ |
| 20A  | and U  | Il Standards: housing and util<br>Utilities Standards; non-mortgag<br>mation is available at www.usd  | ge expenses for the | e appli | cable county a                          | and household size     |                    | \$ |
|      | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.   |   |                     |         | v size (this enter on Line b n Line 42; |                        |                    |    |
| 20B  | a.   | IRS Housing and Utilities Sta   | ndards; mortgage/   | /rental | expense                                 | \$                     |                    |    |
|      | b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42  |   |                     |         |   | \$                     |                    |    |
|      | c.   | Net mortgage/rental expense   |                     |         |   | Subtract Line l        | o from Line a      | \$ |
| 21   | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:   |   |                     |         |   |                        | \$                 |    |
|      | Loca   | l Standards: transportation;  | vehicle operation   | ı/publ  | ic transportat                          | <b>ion expense.</b> Yo | ou are entitled to | T  |
|      |  | spense allowance in this categor<br>regardless of whether you use pu  |                     |         | you pay the ex                          | xpenses of operation   | ting a vehicle     |    |
| 22.4 |  | k the number of vehicles for whoses are included as a contribute  |                     |         |   |                        | perating           |    |
| 22A  |  | ☐ 1 ☐ 2 or more.  | 41 . "D 11" . T     | 4 . 4   | ·                                       | IDC I 1 C              | 4 4 4              |    |
|      | Tran<br>Loca<br>Statis   | If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) |                     |         |   |                        |                    | \$ |
|      |  |   | additional public   | trans   | sportation exp                          | ense. If you pay       | the operating      | •  |
| 22B  | The state of the s |   |                     |         |   |                        |                    |    |
|      | Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  |   |                     |         |   |                        |                    | \$ |

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| (  |   |    |  |  |  |  |  |
|----|---|----|--|--|--|--|--|
|    | <b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  |    |  |  |  |  |  |
| 23 | ☐ 1 ☐ 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards:  Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line before Line and enter the result in Line 23. Do not enter an amount less than zone.   |    |  |  |  |  |  |
|    | subtract Line b from Line a and enter the result in Line 23. <b>Do not enter an amount less than zero.</b> a. IRS Transportation Standards, Ownership Costs \$  |    |  |  |  |  |  |
|    | Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 42 \$  |    |  |  |  |  |  |
|    | c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a  | \$ |  |  |  |  |  |
| 24 | Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards:  Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. |    |  |  |  |  |  |
|    | a. IRS Transportation Standards, Ownership Costs, Second Car \$   |    |  |  |  |  |  |
|    | Average Monthly Payment for any debts secured by Vehicle 2, as b. stated in Line 42 \$  |    |  |  |  |  |  |
|    | c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a  | \$ |  |  |  |  |  |
| 25 | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  |    |  |  |  |  |  |
| 26 | Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.   |    |  |  |  |  |  |
| 27 | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay  |    |  |  |  |  |  |
| 28 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  |    |  |  |  |  |  |
| 29 | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of   |    |  |  |  |  |  |
| 30 | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.   | \$ |  |  |  |  |  |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  | \$ |  |  |  |  |  |
| 32 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  | \$ |  |  |  |  |  |
| 33 | <b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32.  |    |  |  |  |  |  |

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**B22A** (Official Form 22A) (Chapter 7) (12/08)

|  |                         | Subpart B: Additional Living E<br>Note: Do not include any expenses that y   |   | 32                           |   |
|--|-------------------------|--|---|------------------------------|---|
|  | expe                    | Ith Insurance, Disability Insurance, and Health Savings Anses in the categories set out in lines a-c below that are reasonse, or your dependents.  |   |                              |   |
|  | a.                      | Health Insurance   | \$  |                              |   |
| 2.4  | b.                      | Disability Insurance   | \$  |                              |   |
| 34   | c.                      | Health Savings Account   | \$  |                              |   |
|  | Tota                    | l and enter on Line 34   |   | \$                           |   |
|  |                         | ou do not actually expend this total amount, state your actually expend this total amount. | nal total average monthly ex  | penditures in                |   |
| 35   | mont<br>elder           | tinued contributions to the care of household or family methly expenses that you will continue to pay for the reasonable ly, chronically ill, or disabled member of your household or le to pay for such expenses.   | and necessary care and sup  | port of an                   |   |
| Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. |                         |  |   | tion and                     | 1 |
| 37   | Loca<br><b>prov</b>     | ne energy costs. Enter the total average monthly amount, in all Standards for Housing and Utilities, that you actually experide your case trustee with documentation of your actual the additional amount claimed is reasonable and necessa  | nd for home energy costs. Y expenses, and you must de                                   | ou must                      | 1 |
| 38   | you a<br>secon<br>trust | cation expenses for dependent children less than 18. Enter actually incur, not to exceed \$137.50 per child, for attendance and ary school by your dependent children less than 18 years of the with documentation of your actual expenses, and you asonable and necessary and not already accounted for in  | e at a private or public elem<br>f age. You must provide yo<br>must explain why the amo | entary or<br>our case        | ; |
| 39   | cloth<br>Natio          | itional food and clothing expense. Enter the total average naing expenses exceed the combined allowances for food and conal Standards, not to exceed 5% of those combined allowance. v.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Y tional amount claimed is reasonable and necessary.   | clothing (apparel and service ces. (This information is ava                             | es) in the IRS<br>ailable at | 1 |
| 40   |                         | tinued charitable contributions. Enter the amount that you or financial instruments to a charitable organization as defin  |   |                              |   |
| 41   | Tota                    | al Additional Expense Deductions under § 707(b). Enter th  | e total of Lines 34 through 4   | 40                           |   |

\$

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B22A (Official Form 22A) (Chapter 7) (12/08)

|    | Subpart C: Deductions for Debt Payment   |   |  |                            |                               |  |    |  |
|----|--|---|--|----------------------------|-------------------------------|--|----|--|
|    | <b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.   |   |  |                            |                               |  |    |  |
| 42 | a.   | Name of Creditor  |  | Securing the Debt          | Average<br>Monthly<br>Payment | Does payment include taxes or insurance? |    |  |
|    | b.   |   |  |                            | \$                            | yes no                                   |    |  |
|    | c.   |   |  | Total: Ad                  | \$ dd lines a, b and c.       | yes no                                   | \$ |  |
|    | Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. |   |  |                            |                               |  |    |  |
| 43 |  | Name of Creditor  |  | Property Securing the Debt |                               | 1/60th of the<br>Cure Amount             |    |  |
|    | a.<br>b.   |   |  |                            |                               | \$                                       |    |  |
|    | c.   |   |  |                            |                               | \$                                       |    |  |
|    |  |   |  | <u> </u>                   | Total: Add                    | l lines a, b and c.                      | \$ |  |
| 44 | such   | nents on prepetition priority class priority tax, child support and ruptcy filing. Do not include cur   | alimony o  | claims, for which you      | u were liable at the tir      | ne of your                               | \$ |  |
|    | follo  | pter 13 administrative expenses wing chart, multiply the amount in instrative expense.  | •  | <u> </u>                   |                               | 1  |    |  |
|    | a.   | Projected average monthly chap  | pter 13 pla  | an payment.                | \$                            |  |    |  |
| 45 | b.   | Current multiplier for your district schedules issued by the Execution Trustees. (This information is a <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the court.) | utive Office for United Stat<br>s available at               |                            | X                             |  |    |  |
|    | c.   | Average monthly administrative case   | trative expense of chapter 13  Total: Multiply Lines a and b |                            |                               |  | \$ |  |
| 46 | Tota   | l Deductions for Debt Payment   | Enter the  | e total of Lines 42 th     | rough 45.                     |  | \$ |  |
|    |  | Si  | ubpart D   | : Total Deductions         | from Income                   |  |    |  |
| 47 | Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.  |   |  |                            |                               |  |    |  |

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| `  | Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION  |                    |            |      |  |  |  |  |  |
|----|--|--------------------|------------|------|--|--|--|--|--|
| 48 | Enter the amount from Line 18 (Current monthly income for § 707(b)(2))   |                    | \$         |      |  |  |  |  |  |
| 49 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))  |                    | \$         |      |  |  |  |  |  |
| 50 | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the   | result.            | \$         |      |  |  |  |  |  |
| 51 | <b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the numeriter the result.   | ber 60 and         | \$         |      |  |  |  |  |  |
|    | Initial presumption determination. Check the applicable box and proceed as directed.   |                    |            |      |  |  |  |  |  |
|    | ☐ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.   |                    |            |      |  |  |  |  |  |
| 52 | The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.  |                    |            |      |  |  |  |  |  |
|    | ☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the rethough 55).  | mainder of Par     | t VI (Line | s 53 |  |  |  |  |  |
| 53 | Enter the amount of your total non-priority unsecured debt   |                    |            |      |  |  |  |  |  |
| 54 | Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.   |                    |            |      |  |  |  |  |  |
|    | <b>Secondary presumption determination.</b> Check the applicable box and proceed as directed.  |                    | •          |      |  |  |  |  |  |
| 55 | ☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.   |                    |            |      |  |  |  |  |  |
|    | ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You VII.  |                    |            |      |  |  |  |  |  |
|    | Part VII. ADDITIONAL EXPENSE CLAIMS  |                    |            |      |  |  |  |  |  |
|    | <b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, the and welfare of you and your family and that you contend should be an additional deduction from under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All average monthly expense for each item. Total the expenses. | om your curren     | t monthly  |      |  |  |  |  |  |
|    | Expense Description  | Monthly A          | mount      |      |  |  |  |  |  |
| 56 | a.   | \$                 |            |      |  |  |  |  |  |
|    | b.   | \$                 |            |      |  |  |  |  |  |
|    | c.   | \$                 |            |      |  |  |  |  |  |
|    | Total: Add Lines a, b and c  | \$                 |            |      |  |  |  |  |  |
|    | Part VIII. VERIFICATION  |                    |            |      |  |  |  |  |  |
|    | I declare under penalty of perjury that the information provided in this statement is true and contain both debtors must sign.)  | orrect. (If this a | joint case | е,   |  |  |  |  |  |
| 57 | Date: July 17, 2009 Signature: /s/ Julienne Grace Sassetti   |                    |            |      |  |  |  |  |  |
|    | Date: Signature:(Joint Debtor, if any)   |                    |            |      |  |  |  |  |  |

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Estimated Liabilities

\$0 to

\$10 million

\$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001

\$1 million

\$500,000

Case 09-26014 **B1** (Official Form 1) (1/08) Filed 07/17/09 Entered 07/17/09 19:10:33 Desc Main Doc 1 Document Page 11 of 39 **United States Bankruptcy Court** Voluntary Petition **Northern District of Illinois** Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse) (Last, First, Middle): Sassetti, Julienne Grace All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 8323 EIN (if more than one, state all): Street Address of Debtor (No. & Street, City, State & Zip Code): Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 13232 Skyline Drive Plainfield, IL **ZIPCODE 60585** ZIPCODE County of Residence or of the Principal Place of Business: County of Residence or of the Principal Place of Business: Will Mailing Address of Debtor (if different from street address) Mailing Address of Joint Debtor (if different from street address): ZIPCODE ZIPCODE Location of Principal Assets of Business Debtor (if different from street address above): ZIPCODE Type of Debtor Chapter of Bankruptcy Code Under Which **Nature of Business** (Form of Organization) (Check **one** box.) the Petition is Filed (Check one box.) (Check one box.) Chapter 7 Health Care Business Chapter 15 Petition for ✓ Individual (includes Joint Debtors) Single Asset Real Estate as defined in 11 Chapter 9 Recognition of a Foreign See Exhibit D on page 2 of this form. U.S.C. § 101(51B) Chapter 11 Main Proceeding Corporation (includes LLC and LLP) Railroad Chapter 12 Chapter 15 Petition for Stockbroker
Commodite Partnership Chapter 13 Recognition of a Foreign Other (If debtor is not one of the above entities, Commodity Broker Nonmain Proceeding Clearing Bank check this box and state type of entity below.) Nature of Debts Other (Check one box.) **✓** Debts are primarily consumer Debts are primarily Tax-Exempt Entity debts, defined in 11 U.S.C. business debts. § 101(8) as "incurred by an (Check box, if applicable.) Debtor is a tax-exempt organization under individual primarily for a personal, family, or house-Title 26 of the United States Code (the Internal Revenue Code). hold purpose." Filing Fee (Check one box) **Chapter 11 Debtors** Check one box: ✓ Full Filing Fee attached Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must Check all applicable boxes: attach signed application for the court's consideration. See Official Form 3B. A plan is being filed with this petition Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). Statistical/Administrative Information THIS SPACE IS FOR COURT USE ONLY Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. Estimated Number of Creditors  $\checkmark$ П 1-49 50-99 100-199 200-999 1,000-5,001-10,001-25,001-50,001-Over 100,000 5,000 10,000 50,000 100,000 25,000 Estimated Assets  $\overline{\mathbf{V}}$ \$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001 \$50,000,001 to \$100,000,001 \$500,000,001 More than \$50,000 \$100,000 \$500,000 \$1 million \$10 million to \$50 million \$100 million to \$500 million to \$1 billion \$1 billion

\$50,000,001 to

to \$50 million \$100 million

\$100,000,001

to \$500 million to \$1 billion

\$500,000,001 More than

| Prior Bankruptcy Case Filed Within Last  | 8 Years (If more than two, attack   | h additional sheet)   |
|--|---|---|
| Location<br>Where Filed: <b>None</b>   | Case Number:  | Date Filed:   |
| Location<br>Where Filed:   | Case Number:  | Date Filed:   |
| Pending Bankruptcy Case Filed by any Spouse, Partner or  | Affiliate of this Debtor (If m  | ore than one, attach additional sheet)  |
| Name of Debtor:<br>None  | Case Number:  | Date Filed:   |
| District:  | Relationship:   | Judge:  |
| Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.   | (To be complete whose debts are I, the attorney for the petitioner that I have informed the petitic chapter 7, 11, 12, or 13 of the explained the relief available to | Exhibit B d if debtor is an individual primarily consumer debts.) r named in the foregoing petition, declar oner that [he or she] may proceed unde title 11, United States Code, and have under each such chapter. I further certify the notice required by § 342(b) of the |
|  | X /s/ Gregory M. Berg   | 7/17/09   |
|  | Signature of Attorney for Debtor(s)   |   |
| (To be completed by every individual debtor. If a joint petition is filed, e  ▼ Exhibit D completed and signed by the debtor is attached and ma  If this is a joint petition:  | nde a part of this petition.  | tach a separate Exhibit D.)   |
| Exhibit D also completed and signed by the joint debtor is attach  |   |   |
|  |   | this District for 180 days immediately  |
| ☐ There is a bankruptcy case concerning debtor's affiliate, general  | partner, or partnership pending in  | n this District.  |
| ☐ Debtor is a debtor in a foreign proceeding and has its principal plot or has no principal place of business or assets in the United States in this District, or the interests of the parties will be served in reg   | but is a defendant in an action or p  | proceeding [in a federal or state court]  |
| Certification by a Debtor Who Reside (Check all app Landlord has a judgment against the debtor for possession of debtor f | olicable boxes.)  | • •   |
| (Name of landlord or less  | or that obtained judgment)  |   |
| (Address of lar  | ndlord or lessor)   |   |

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
 Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Case 09-26014 B1 (Official Form 1) (1/08)

filing of the petition.

(This page must be completed and filed in every case)

**Voluntary Petition** 

Doc 1

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Document

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Page 12 of 39
Name of Debtor(s):

Sassetti, Julienne Grace

Desc Main

Page 2

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#### **Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

(Check only one box.)

Date

Sassetti, Julienne Grace

#### **Signatures**

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this

petition is true and correct, that I am the foreign representative of a debtor

☐ I request relief in accordance with chapter 15 of title 11, United

in a foreign proceeding, and that I am authorized to file this petition.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| Signature of    | Foreign Represen    | itative    |  |
|-----------------|---------------------|------------|--|
|                 |                     |            |  |
|                 |                     |            |  |
| Printed Nan     | ne of Foreign Repr  | ecentative |  |
| i iiiica i vaii | ic of foreign reepf | Cacitative |  |

#### /s/ Julienne Grace Sassetti

Signature of Debtor

Julienne Grace Sassetti

Х

Signature of Joint Debtor

(702) 742-6990

Telephone Number (If not represented by attorney)

July 17, 2009

Date

#### Signature of Attorney\*

#### X /s/ Gregory M. Berg

Signature of Attorney for Debtor(s)

Gregory M. Berg Law Offices Of Steven H. Mevorah & Associates 900 E. Roosevelt Road Lombard, IL 60108 (630) 932-9100 Fax: (630) 932-9868 GBerg@Mevorahlaw.com

#### July 17, 2009

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

| Signature  | of Authorize | d Individual   |      |  |
|------------|--------------|----------------|------|--|
| Printed N  | ame of Auth  | orized Individ | lual |  |
| Title of A | uthorized In | lividual       |      |  |
|            |              |                |      |  |

#### Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

| Χ |  |  |  |
|---|--|--|--|

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Case 09-26014 B1D (Official Form 1, Exhibit D) (12/08)

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**Northern District of Illinois** 

| IN RE:                   | Case No   |
|--------------------------|-----------|
| Sassetti, Julienne Grace | Chapter 7 |
| Debtor(s)                | 1         |

#### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose

| 8           | whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.   |
|-------------|--|
|             | Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.  |
| t           | 1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.   |
| t r         | 2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by he United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.                                    |
| Ċ           | 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]   |
|             |  |
| y<br>c<br>c | If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit |
|             | counseling briefing.  4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a   |
| r           | notion for determination by the court.]  Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);   |
|             | Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);  |
|             |  |

Active military duty in a military combat zone. 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h)

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Julienne Grace Sassetti

Date: July 17, 2009

does not apply in this district.

B6 Summary (Case 09-26014 Doc 1

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Document Page 15 of 39 United States Bankruptcy Court **Northern District of Illinois** 

| IN RE:                   |           | Case No.  |
|--------------------------|-----------|-----------|
| Sassetti, Julienne Grace |           | Chapter 7 |
|                          | Debtor(s) | •         |

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NUMBER OF<br>SHEETS | ASSETS       | LIABILITIES  | OTHER       |
|--|----------------------|---------------------|--------------|--------------|-------------|
| A - Real Property  | Yes                  | 1                   | \$ 0.00      |              |             |
| B - Personal Property  | Yes                  | 3                   | \$ 35,090.00 |              |             |
| C - Property Claimed as Exempt   | Yes                  | 1                   |              |              |             |
| D - Creditors Holding Secured Claims   | Yes                  | 1                   |              | \$ 20,352.08 |             |
| E - Creditors Holding Unsecured Priority<br>Claims (Total of Claims on Schedule E) | Yes                  | 2                   |              | \$ 1,400.00  |             |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 2                   |              | \$ 41,269.59 |             |
| G - Executory Contracts and Unexpired<br>Leases                                    | Yes                  | 1                   |              |              |             |
| H - Codebtors  | Yes                  | 1                   |              |              |             |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 1                   |              |              | \$ 795.50   |
| J - Current Expenditures of Individual Debtor(s)                                   | Yes                  | 1                   |              |              | \$ 2,067.87 |
|  | TOTAL                | 14                  | \$ 35,090.00 | \$ 63,021.67 |             |

Form 6 - Statistical Summary (2007)

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|-------------------------------|-----|
| Northern District of Illinois |     |
|                               |     |

| IN RE:                   | Case No.  |
|--------------------------|-----------|
| Sassetti, Julienne Grace | Chapter 7 |
| Debtor(s)                | •         |

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount         |
|---|----------------|
| Domestic Support Obligations (from Schedule E)  | \$<br>0.00     |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | \$<br>1,400.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$<br>0.00     |
| Student Loan Obligations (from Schedule F)  | \$<br>0.00     |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | \$<br>0.00     |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | \$<br>0.00     |
| TOTAL   | \$<br>1,400.00 |

#### **State the following:**

| Average Income (from Schedule I, Line 16)   | \$<br>795.50   |
|---|----------------|
| Average Expenses (from Schedule J, Line 18)   | \$<br>2,067.87 |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C |                |
| Line 20)  | \$<br>1,147.66 |

#### **State the following:**

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |                | \$<br>5,552.08  |
|--|----------------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$<br>1,400.00 |                 |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |                | \$<br>0.00      |
| 4. Total from Schedule F   |                | \$<br>41,269.59 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |                | \$<br>46,821.67 |

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IN RE Sassetti, Julienne Grace

Case No.

Debtor(s)

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(If known)

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S<br>INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION | AMOUNT OF SECURED<br>CLAIM |
|--------------------------------------|--|---------------------------------------|--|----------------------------|
| None                                 |  |                                       |  |                            |
|                                      |  |                                       |  |                            |
|                                      |  |                                       |  |                            |
|                                      |  |                                       |  |                            |
|                                      |  |                                       |  |                            |
|                                      |  |                                       |  |                            |
|                                      |  |                                       |  |                            |

TOTAL

0.00

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Debtor(s)

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IN RE Sassetti, Julienne Grace

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Case No. \_\_\_\_\_(If known)

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY                       | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|-----|---|------------------|--|---------------------------------------|--|
| 1.  | Cash on hand.   |                  | Cash on hand   |                                       | 40.00  |
| 2.  | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.                      |                  | Bank of America Checking/Savings Account No. XXXXXXXXX0798 |                                       | 100.00   |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | X                |  |                                       |  |
| 4.  | Household goods and furnishings, include audio, video, and computer equipment.  | X                |  |                                       |  |
| 5.  | Books, pictures and other art objects,<br>antiques, stamp, coin, record, tape,<br>compact disc, and other collections or<br>collectibles.   | X                |  |                                       |  |
| 6.  | Wearing apparel.  |                  | Wearing apparel  |                                       | 100.00   |
| 7.  | Furs and jewelry.   |                  | Miscellanous costume jewelry                               |                                       | 50.00  |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | Х                |  |                                       |  |
| 9.  | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.  | X                |  |                                       |  |
| 10. | Annuities. Itemize and name each issue.   | X                |  |                                       |  |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |  |                                       |  |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |  |                                       |  |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |  |                                       |  |
| 14. | Interests in partnerships or joint ventures. Itemize.   | Х                |  |                                       |  |
|     |   |                  |  |                                       |  |

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IN RE Sassetti, Julienne Grace

Debtor(s)

\_ Case No. \_ (If known)

#### **SCHEDULE B - PERSONAL PROPERTY** (Continuation Sheet)

|     |   |                  |  | _                                     | 1  |
|-----|---|------------------|--|---------------------------------------|--|
|     | TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY   | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments.   | Х                |  |                                       |  |
| 16. | Accounts receivable.  | X                |  |                                       |  |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.  | X                |  |                                       |  |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |  |                                       |  |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.   | X                |  |                                       |  |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  |                  | Debtor bequeathed \$20,000 as part of the Estate of Gary Stephen Cheslock, case number 2008 O 007264 pending in Circuit Court of Cook County, County Department, Probate Division. The solvency of the Estate is unknown at this time. |                                       | 20,000.00  |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |  |                                       |  |
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X                |  |                                       |  |
|     | Licenses, franchises, and other general intangibles. Give particulars.  | X                |  |                                       |  |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |  |                                       |  |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  |                  | 2003 Mercedes 320 E  |                                       | 14,800.00  |
| 26. | Boats, motors, and accessories.   | X                |  |                                       |  |
| 27. | Aircraft and accessories.   | X                |  |                                       |  |
| 28. | Office equipment, furnishings, and supplies.  | X                |  |                                       |  |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |  |                                       |  |
| 30. | Inventory.  | X                |  |                                       |  |
| 31. | Animals.  | X                |  |                                       |  |
|     |   |                  |  |                                       |  |

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IN RE Sassetti, Julienne Grace

Debtor(s)

\_ Case No. \_\_\_\_\_(If known)

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|---|------------------|--------------------------------------|---------------------------------------|--|
| <ul> <li>32. Crops - growing or harvested. Give particulars.</li> <li>33. Farming equipment and implements.</li> <li>34. Farm supplies, chemicals, and feed.</li> <li>35. Other personal property of any kind not already listed. Itemize.</li> </ul> | X<br>X<br>X      |                                      |                                       |  |
|   |                  | TO                                   | ΓAL                                   | 35,090.00  |

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IN RE Sassetti, Julienne Grace

Case No. \_ Debtor(s)

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| Cash on hand 735 ILCS 5 §12-1001(b) 40.00 40.00  Bank of America 735 ILCS 5 §12-1001(b) 100.00  Checking/Savings Account No. (XXXXXXXX0798  Vearing apparel 735 ILCS 5 §12-1001(a) 100.00 100.00  Miscellanous costume jewelry 735 ILCS 5 §12-1001(b) 50.00   | DESCRIPTION OF PROPERTY   | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED<br>EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|---|---|--------------------------------------|-------------------------------|--|
| Checking/Savings Account No.  (XXXXXXX0798  Nearing apparel  Aliscellanous costume jewelry  Debtor bequeathed \$20,000 as part of the Estate of Gary Stephen Cheslock, case number 2008 O 007264 pending in Circuit Court of Cook County, County Department, Probate Division. The solvency of the Estate is unknown at this time.  735 ILCS 5 §12-1001(a)  735 ILCS 5 §12-1001(b)                          | SCHEDULE B - PERSONAL PROPERTY  |                                      |                               |  |
| Checking/Savings Account No.  (XXXXXXXX0798  Nearing apparel  Aliscellanous costume jewelry  Debtor bequeathed \$20,000 as part of the Estate of Gary Stephen Cheslock, case number 2008 O 007264 pending in Circuit Court of Cook County, County Department, Probate Division. The solvency of the Estate is unknown at this time.  735 ILCS 5 §12-1001(b)  735 ILCS 5 §12-1001(b) | Cash on hand  | 735 ILCS 5 §12-1001(b)               | 40.00                         | 40.00  |
| Wearing apparel  Miscellanous costume jewelry  Debtor bequeathed \$20,000 as part of the Estate of Gary Stephen Cheslock, case number 2008 O 007264 pending in Circuit Court of Cook County, County Department, Probate Division. The solvency of the Estate is unknown at this time.   | Bank of America   | 735 ILCS 5 §12-1001(b)               | 100.00                        | 100.0  |
| Miscellanous costume jewelry  Obebtor bequeathed \$20,000 as part of the Estate of Gary Stephen Cheslock, case number 2008 O 007264 pending in Circuit Court of Cook County, County Department, Probate Division. The solvency of the Estate is unknown at this time.  735 ILCS 5 §12-1001(b)  735 ILCS 5 §12-1001(b)  3,810.00  20,000.00  |   |                                      |                               |  |
| Debtor bequeathed \$20,000 as part of the Estate of Gary Stephen Cheslock, case number 2008 O 007264 pending in Circuit Court of Cook County, County Department, Probate Division. The solvency of the Estate is unknown at this time.  | Vearing apparel   | 735 ILCS 5 §12-1001(a)               | 100.00                        | 100.0  |
| state of Gary Stephen Cheslock, case umber 2008 O 007264 pending in Circuit court of Cook County, County Department, robate Division. The solvency of the state is unknown at this time.  | liscellanous costume jewelry  | 735 ILCS 5 §12-1001(b)               | 50.00                         | 50.0   |
| 003 Mercedes 320 E 735 ILCS 5 §12-1001(c) 2,400.00 14,800.00  | state of Gary Stephen Cheslock, case number 2008 O 007264 pending in Circuit Court of Cook County, County Department, Probate Division. The solvency of the | 735 ILCS 5 §12-1001(b)               | 3,810.00                      | 20,000.00  |
|   | 003 Mercedes 320 E  | 735 ILCS 5 §12-1001(c)               | 2,400.00                      | 14,800.0   |
|   |   |                                      |                               |  |

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(If known)

IN RE Sassetti, Julienne Grace

Debtor(s) Case No.

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND DESCRIPTION AND VALUE OF<br>PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF ANY |
|--|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| ACCOUNT NO. XXXXXX4572   |          |                                       | 2003 Mercedes 320 E  |            |              |          | 20,352.08   | 5,552.08                     |
| Wachovia Dealer Services<br>PO Box 25341<br>Santa Ana, CA 92799-5341                                 |          |                                       | VALUE \$ 14,800.00   |            |              |          |   |                              |
| ACCOUNT NO.  |          |                                       | 14,000.00  |            |              |          |   |                              |
|  |          |                                       | VALUE \$   |            |              |          |   |                              |
| ACCOUNT NO.  |          |                                       | VALUE \$   |            |              |          |   |                              |
| ACCOUNT NO.  | -        |                                       | VALUE \$  VALUE \$   |            |              |          |   |                              |
| 0 continuation sheets attached   |          |                                       | (Total of the  | is p       | _            | e)       | \$ 20,352.08  | \$ 5,552.08                  |
|  |          |                                       | (Use only on la  |            | Tot<br>page  |          | \$ 20,352.08  | \$ 5,552.08                  |

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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IN RE Sassetti, Julienne Grace

1 continuation sheets attached

Debtor(s)

Case No. (If known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. © 1993-2009 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations** Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). Deposits by individuals Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). **▼** Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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(If known)

IN RE Sassetti, Julienne Grace

Debtor(s)

Case No. \_

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

#### Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority for Claims Listed on This Sheet)

|   |                |                                       | (Type of Priority for Claims Listed on This Shee   | t)           |                   |           |    |   |   |  |
|---|----------------|---------------------------------------|--|--------------|-------------------|-----------|----|---|---|--|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE AND ACCOUNT NUMBER.<br>(See Instructions above.) | CODEBTOR       | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED<br>AND CONSIDERATION FOR CLAIM                                       | CONTINGENT   | UNLIQUIDATED      | DISPITTED |    | AMOUNT<br>OF<br>CLAIM                   | AMOUNT<br>ENTITLED<br>TO<br>PRIORITY    | AMOUNT<br>NOT<br>ENTITLED<br>TO<br>PRIORITY,<br>IF ANY |
| ACCOUNT NO. XXX-XX-8323   |                |                                       | 2008 Income Taxes  |              |                   | t         |    |   |   |  |
| Internal Revenue Service<br>Department Of The Treasury<br>Kansas City, MO 64999-0030                    |                |                                       |  |              |                   |           |    | 1,400.00                                | 1,400.00                                |  |
| ACCOUNT NO.   |                |                                       |  |              |                   |           | 1  | -,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |  |
|   |                |                                       |  |              |                   |           |    |   |   |  |
| ACCOUNT NO.   |                |                                       |  |              |                   |           |    |   |   |  |
| ACCOUNT NO.   |                |                                       |  |              |                   |           |    |   |   |  |
| ACCOUNT NO.   |                |                                       |  |              |                   |           |    |   |   |  |
| ACCOUNT NO.   |                |                                       |  |              |                   |           |    |   |   |  |
|   |                |                                       |  | 6 .          |                   |           |    |   |   |  |
| Sheet no. <u>1</u> of <u>1</u> continuation sheet Schedule of Creditors Holding Unsecured Priority      | s att<br>/ Cla | ached<br>aims                         | to (Totals of t  | Sub<br>his p |                   |           | \$ | 1,400.00                                | \$ 1,400.00                             | \$   |
| (Use only on last page of the com   | plet           | ed Scl                                | nedule E. Report also on the Summary of Sc   | hedu         |                   | s.)       | \$ | 1,400.00                                |   |  |
| (Us<br>report also on th  | se on          | nly on                                | last page of the completed Schedule E. If ap<br>al Summary of Certain Liabilities and Relate | plic         | Tot<br>abl<br>ata | le,       |    |   | \$ 1,400.00                             | \$   |

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Case No. \_\_\_\_\_(If known)

## Debtor(s) (If SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT   | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
|--|----------|---------------------------------------|---|--------------|--------------|----------|-----------------------|
| ACCOUNT NO. XXXX-XXXX-XXXX-7963  |          |                                       | 2005-2008 Moving and living expenses  | П            |              |          |                       |
| Bank Of America<br>PO Box 17322<br>Baltimore, MD 21297-1322  |          |                                       |   |              |              |          | 2,412.53              |
| ACCOUNT NO. XXXXXXXXXXXXX8648  |          |                                       | June, 2008 Miscellaneous clothing   |              |              |          |                       |
| Carson Pirie Scott<br>PO Box 17254<br>Baltimore, MD 21297-1264   |          |                                       |   |              |              |          | 723,26                |
| ACCOUNT NO. XXXX-XXXX-XXXX-4298  | T        |                                       | Miscellaneous credit card charges   | H            | $\exists$    | П        |                       |
| Chase<br>PO Box 15291<br>Wilmington, DE 19826  |          |                                       | _   |              |              |          | 8,160.53              |
| ACCOUNT NO. XXXX-XXXX-XXXX-9286  | T        |                                       | 2003 Miscellaneous credit card charges  | П            | ┨            | П        | ·                     |
| Chase<br>PO Box 15291<br>Wilmington, DE 19826  |          |                                       |   |              |              |          | 4,345.22              |
| 4  | -        |                                       |   | Subt         |              |          | · 45 644 54           |
| 1 continuation sheets attached   |          |                                       | (Total of th  |              | age<br>Tota  | - 1      | \$ 15,641.54          |
|  |          |                                       | (Use only on last page of the completed Schedule F. Report<br>the Summary of Schedules and, if applicable, on the St<br>Summary of Certain Liabilities and Relate | also<br>atis | o oi<br>tica | n<br>al  | \$                    |

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(If known)

IN RE Sassetti, Julienne Grace

\_ Case No. \_ Debtor(s)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  | _        | _ (                                   | Continuation Sneet)  | _              | _            |           |   |
|--|----------|---------------------------------------|--|----------------|--------------|-----------|---|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE   | CONTINGENT     | UNLIQUIDATED | DISPUTED  | AMOUNT<br>OF<br>CLAIM                   |
| ACCOUNT NO. XXXX-XXX-XXXX-5995   |          |                                       | 2005-2008 Miscellaneous credit card charges  | T              |              | H         |   |
| Citi Cards PO Box 689105 Des Moines, IA 50368-9105   |          |                                       | •  |                |              |           | 6,787.57                                |
| ACCOUNT NO. XXXX-XXXX-XXXX-3009  |          |                                       | 2006-2008 Miscellaneous credit card charges  | $\vdash$       |              |           | 0,707.07                                |
| Discover<br>PO Box 30395<br>Salt Lake City, UT 84130-0395  |          |                                       | •  |                |              |           | 6,101.65                                |
| ACCOUNT NO. XXXXXXXXXXXX47243  |          |                                       | 2007-2008 Miscellaneous credit card charges  | +              |              | H         | 0,101.03                                |
| GE Money Bank PO Box 960061 Orlando, FL 32896  |          |                                       | • • • • • • • • • • • • • • • • • • •  |                |              |           | 2,318.22                                |
| ACCOUNT NO. XXXXX8679  |          |                                       | Medical services rendered  |                |              |           |   |
| Good Samaritan Hospital<br>3815 Highland Avenue<br>Downers Grove, IL 60515                               |          |                                       |  |                |              |           |   |
|  | ┞        |                                       | 2004 Miccollopacus aredit pard sharras   | ╀              |              |           | 381.90                                  |
| ACCOUNT NO. XXXXXXXXXXXXX1905  Sears Credit Cards PO Box 183081  Columbus, OH 43218-3081                 |          |                                       | 2004 Miscellaneous credit card charges   |                |              |           | 3,072.93                                |
| ACCOUNT NO. XXXX-XXXX-XXXX-5402  |          |                                       | May, 2008 Miscellaneous credit card charges  | H              |              |           | 0,072.55                                |
| Sears Gold Mastercard<br>PO Box 183082<br>Columbus, OH 43218-3082  |          |                                       |  |                |              |           | 1,486.71                                |
| ACCOUNT NO. XXXX-XXXX-XXXX-7773  | $\vdash$ |                                       | 2004 Miscellanous credit card charges  |                |              | $\forall$ | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Washington Mutual<br>PO Box 660487<br>Dallas, TX 75266-0487  |          |                                       |  |                |              |           | F 1770 C-                               |
| Sheet no. 1 of 1 continuation sheets attached to   |          |                                       |  | C 1.1.         | tot          |           | 5,479.07                                |
| Sheet no1 of1 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of the  | Sub<br>nis p   |              |           | \$ 25,628.05                            |
|  |          |                                       | (Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate | t als<br>tatis | stica        | n<br>al   | <b>\$ 41,269.59</b>                     |

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IN RE Sassetti, Julienne Grace Debtor(s) Case No.

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE<br>OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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IN RE Sassetti, Julienne Grace

\_\_\_\_\_ Case No. \_

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
|                              |                              |
|                              |                              |
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Case No.

Debtor(s)

(If known)

#### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current

| Debtor's Marital Status   | DEPENDENTS (  | OF DEBTOR AND   | SPOUS       | E       |            |         |
|---|---|-----------------|-------------|---------|------------|---------|
| Divorced  | RELATIONSHIP(S):                                      |                 |             |         | AGE(S)     | ):      |
|   |   |                 |             |         |            |         |
|   |   |                 |             |         |            |         |
|   |   |                 |             |         |            |         |
| EMDLOVMENT.   | DERTOR  |                 |             | CDOLICE |            |         |
| EMPLOYMENT:   | DEBTOR  |                 |             | SPOUSE  |            |         |
| Occupation  |   |                 |             |         |            |         |
| Name of Employer How long employed  |   |                 |             |         |            |         |
|   |   |                 |             |         |            |         |
| Address of Employer   |   |                 |             |         |            |         |
| INCOME: (Estimate of aver-  | age or projected monthly income at time case filed)   |                 |             | DEBTOR  |            | SPOUSE  |
|   | es, salary, and commissions (prorate if not paid mo   |                 | \$          | DLBTOR  | •          | SI OUSL |
| 2. Estimated monthly overtim  |   | nuny)           | \$          |         | \$ ——      |         |
| 3. SUBTOTAL   |   | I               | <u>Ф</u>    | 0.00    | <u>+</u> — |         |
| 4. LESS PAYROLL DEDUC   | TIONS   | l               | <b>Φ</b>    | 0.00    | <u> </u>   |         |
| a. Payroll taxes and Social S   |   |                 | \$          |         | \$         |         |
| b. Insurance  | security  |                 | \$          |         | \$ ——      |         |
| c. Union dues   |   |                 | \$          |         | \$         |         |
|   |   |                 | \$          |         | \$         |         |
| \ 1   |   |                 | \$          |         | \$         |         |
| 5. SUBTOTAL OF PAYRO  | LL DEDUCTIONS   |                 | \$          | 0.00    | \$         |         |
| 6. TOTAL NET MONTHLY  | Y TAKE HOME PAY                                       |                 | \$          | 0.00    | \$         |         |
| 7 Regular income from opera   | ation of business or profession or farm (attach detai | led statement)  | \$          |         | \$         |         |
| 8. Income from real property  | tion of business of profession of farm (attach detail |                 | \$ ——       |         | \$ ——      |         |
| 9. Interest and dividends   |   |                 | \$          |         | \$         |         |
|   | support payments payable to the debtor for the deb    | tor's use or    |             |         |            |         |
| that of dependents listed above   |   |                 | \$          |         | \$         |         |
| 11. Social Security or other go   |   |                 |             |         |            |         |
| (Specify) <b>Unemployment (</b>   | Compensation  |                 | \$          | 795.50  | \$         |         |
| 10. P   |   |                 | \$          |         | \$         |         |
| <ul><li>12. Pension or retirement inco</li><li>13. Other monthly income</li></ul> | ome   |                 | \$          |         | \$         |         |
| (Specify)   |   |                 | <b>\$</b>   |         | •          |         |
| (Specify)   |   |                 | \$<br>      |         | \$ ——      |         |
|   |   |                 | \$          |         | \$         |         |
| 14. SUBTOTAL OF LINES   | 7 THROUGH 12  | i               | Φ           | 795.50  | •          |         |
|   |   |                 | φ           |         |            |         |
| 15. AVEKAGE MONTHLY   | YINCOME (Add amounts shown on lines 6 and 14          | ·)              | <b>&gt;</b> | 795.50  | <u> </u>   |         |
|   | E MONTHLY INCOME: (Combine column total               | s from line 15; |             |         |            |         |
| if there is only one debtor rep   | eat total reported on line 15)                        |                 |             | \$      | 795.       | .50     |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: None

IN RE Sassetti, Julienne Grace

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Debtor(s)

\_ Case No. \_ (If known)

| SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S   | <b>b</b> )                      |                                 |
|--|---------------------------------|---------------------------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate at quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deduction Form22A or 22C. | ny payments n<br>ctions from in | nade biweekly,<br>ncome allowed |
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a expenditures labeled "Spouse."  | ı separate s                    | schedule of                     |
| 1. Rent or home mortgage payment (include lot rented for mobile home) a. Are real estate taxes included? Yes No _✓   | \$                              |                                 |
| b. Is property insurance included? Yes No 2. Utilities:  |                                 |                                 |
| a. Electricity and heating fuel  | \$                              |                                 |
| b. Water and sewer   | \$                              |                                 |
| c. Telephone   | \$                              | 120.00                          |
| d. Other   | \$                              |                                 |
|  | - \$                            |                                 |
| 3. Home maintenance (repairs and upkeep)   | \$                              |                                 |
| 4. Food  | \$                              | 300.00                          |
| 5. Clothing  | \$                              | 100.00                          |
| 6. Laundry and dry cleaning  | \$                              | 80.00                           |
| 7. Medical and dental expenses   | \$                              | 90.00                           |
| 8. Transportation (not including car payments)   | \$                              | 360.00                          |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.  | \$                              | 100.00                          |
| 10. Charitable contributions   | \$                              |                                 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) a. Homeowner's or renter's   | •                               |                                 |
| b. Life  | \$ ——                           | 10.00                           |
| c. Health  | \$                              | 240.00                          |
| d. Auto  | \$                              | 105.00                          |
| e. Other   | \$                              | 100100                          |
|  | \$                              |                                 |
| 12. Taxes (not deducted from wages or included in home mortgage payments)  | •                               |                                 |
| (Specify)  | - \$                            |                                 |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)  | <u> </u>                        |                                 |
| a. Auto  | \$                              | 462.87                          |
| b. Other Personal Hygiene, Hair, Nails Etc.  | _ \$                            | 100.00                          |
| 14. All  | _ \$                            |                                 |
| <ul><li>14. Alimony, maintenance, and support paid to others</li><li>15. Payments for support of additional dependents not living at your home</li></ul>   | \$                              |                                 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)   | \$                              |                                 |
| 17. Other  | \$ ———                          |                                 |
| 17. Other  | - \$                            |                                 |
|  | _ \$                            |                                 |
| <b>18. AVERAGE MONTHLY EXPENSES</b> (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.   | \$                              | 2,067.87                        |
| 19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of the None  | his docume                      | ent:                            |

#### 20. STATEMENT OF MONTHLY NET INCOME

| a. Average monthly income from Line 15 of Schedule I | \$<br>795.50    |
|--|-----------------|
| b. Average monthly expenses from Line 18 above       | \$<br>2,067.87  |
| c. Monthly net income (a. minus b.)                  | \$<br>-1.272.37 |

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(If known)

(Print or type name of individual signing on behalf of debtor)

IN RE Sassetti, Julienne Grace

Debtor(s)

Case No.

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **16** sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: July 17, 2009 Signature: /s/ Julienne Grace Sassetti Julienne Grace Sassetti Signature: \_\_ (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. Signature:

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

 $_{B7 \text{ (Official Form)}}$  Case (1209)-26014

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Document Page 32 of 39 **United States Bankruptcy Court** 

Northern District of Illinois

| IN RE:                   |           | Case No   |
|--------------------------|-----------|-----------|
| Sassetti, Julienne Grace |           | Chapter 7 |
| ·                        | Debtor(s) | 1         |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

3,500.00 Year to date 2009 Income

26,847.00 2008 Income

#### 2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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|--------------|---|--|--|--|--|--|
| None         | b. Debtor whose debts are not primarily of preceding the commencement of the case \$5,475. If the debtor is an individual, individual, obligation or as part of an alternative repay debtors filing under chapter 12 or chapter is filed, unless the spouses are separated as | consumer debts: List each unless the aggregate value cate with an asterisk (*) arment schedule under a plan 13 must include payments | payment or other transfer to<br>e of all property that constitute<br>by payments that were made<br>by an approved nonprofit but<br>and other transfers by either | utes or is affect<br>to a creditor on<br>adgeting and crea | ed by such tra<br>account of a<br>dit counseling | ansfer is less than<br>domestic support<br>gagency. (Married |
|              |   |  |  |  | NT PAID  |  |
| Wacl<br>PO B | E AND ADDRESS OF CREDITOR<br>novia Dealer Services<br>ox 25341<br>a Ana, CA 92799-5341  | DATE OF PA<br>June, 2009<br>May, 2009<br>April, 2009   | YMENTS/TRANSFERS   | TRA  | LUE OF<br>NSFERS<br>1,388.61                     | AMOUNT<br>STILL OWING<br><b>20,352.08</b>                    |
|              | unt No. XXXXXX4572<br>Mercedes 320 E automobile   |  |  |  |  |  |
| None         | c. All debtors: List all payments made wi<br>who are or were insiders. (Married debtors<br>a joint petition is filed, unless the spouses  | s filing under chapter 12 or   | chapter 13 must include pay  |  |  |  |
| 4. Sui       | ts and administrative proceedings, execu  | tions, garnishments and  | attachments  |  |  |  |
| None         | a. List all suits and administrative procee<br>bankruptcy case. (Married debtors filing u<br>not a joint petition is filed, unless the spo  | inder chapter 12 or chapter  | 13 must include information  |  |  |  |
| None         | b. Describe all property that has been attact the commencement of this case. (Married or both spouses whether or not a joint pet  | debtors filing under chapt   | er 12 or chapter 13 must inc   | lude information   | n concerning                                     |  |
| 5. Re        | possessions, foreclosures and returns   |  |  |  |  |  |
| None         | List all property that has been repossessed<br>the seller, within <b>one year</b> immediately princlude information concerning property of<br>joint petition is not filed.)   | receding the commenceme  | nt of this case. (Married deb  | tors filing under  | r chapter 12 o                                   | or chapter 13 must   |
| 6. Ass       | signments and receiverships   |  |  |  |  |  |
| None         | a. Describe any assignment of property for<br>(Married debtors filing under chapter 12 or<br>unless the spouses are separated and joint   | chapter 13 must include ar   |  |  |  |  |
| None         | b. List all property which has been in the commencement of this case. (Married debt spouses whether or not a joint petition is  | ors filing under chapter 12  | or chapter 13 must include in  | formation conce  |  |  |
| 7. Gif       | its   |  |  |  |  |  |
| None         | List all gifts or charitable contributions m<br>gifts to family members aggregating less th<br>per recipient. (Married debtors filing unde<br>a joint petition is filed, unless the spouses   | an \$200 in value per indivi<br>r chapter 12 or chapter 13   | dual family member and char<br>must include gifts or contrib   | ritable contribut  | ions aggregat                                    | ing less than \$100  |
| о т          |   |  |  |  |  |  |

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8. Losses

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Steven H. Mevorah & Associates 900 East Roosevelt

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

1,800.00

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Lombard, IL 60148 US. Bankrupcty Court

US. Bankrupcty Court 299.00
219 S. Dearborn Street
Chicago, IL 60604

#### 10. Other transfers

None a. List all o

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

 $\checkmark$ 

#### 15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY 644 Sumatra, Las Vegas, NV 89011 Sassetti June 2006 - March 2008

#### 16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

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|---------------|-------|----------------|---------------------------|-----------|
|               |       | Document       | Page 35 of 39             |           |

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 $\checkmark$ 

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date: <b>July 17, 2009</b> | Signature /s/ Julienne Grace Sassetti |                         |
|----------------------------|---------------------------------------|-------------------------|
|                            | of Debtor                             | Julienne Grace Sassetti |
| Date:                      | Signature                             |                         |
|                            | of Joint Debtor                       |                         |
|                            | (if any)                              |                         |

\_\_\_\_\_**0** continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

 $Case~09\text{-}26014~~Doc~1\\ B8~(Official~Form~8)~(12/08)$ 

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**Northern District of Illinois** 

| IN RE:   |  | Case No   |  |  |  |
|--|--|---|--|--|--|
| Sassetti, Julienne Grace   |  | Chapter <b>7</b>  |  |  |  |
|  | Debtor(s)                              |   |  |  |  |
| CHAPTER  | 7 INDIVIDUAL DEBTO                     | OR'S STATEME  | NT OF INTENTION  |  |  |
| <b>PART A</b> – Debts secured by property estate. Attach additional pages if necessity                                   |  | e fully completed fo                                    | r EACH debt which is secured by property of the                      |  |  |
| Property No. 1   |  |   |  |  |  |
| Creditor's Name:<br>Wachovia Dealer Services   |  | Describe Property Securing Debt:<br>2003 Mercedes 320 E |  |  |  |
| Property will be (check one):  ☐ Surrendered ✓ Retained  |  |   |  |  |  |
| If retaining the property, I intend to (check at least one):  ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain |  | (fo   | r example, avoid lien using 11 U.S.C. § 522(f)).                     |  |  |
| Property is (check one):  ✓ Claimed as exempt  Not cla   | nimed as exempt                        |   |  |  |  |
| Property No. 2 (if necessary)  |  |   |  |  |  |
| Creditor's Name:   |  | Describe Property Securing Debt:                        |  |  |  |
| Property will be (check one):  Surrendered Retained  |  |   |  |  |  |
| If retaining the property, I intend to  Redeem the property Reaffirm the debt Other. Explain                             | (check at least one):                  | (fo   | r example, avoid lien using 11 U.S.C. § 522(f)).                     |  |  |
| Property is (check one):  Claimed as exempt Not cla  | nimed as exempt                        |   |  |  |  |
| <b>PART B</b> – Personal property subject t additional pages if necessary.)  | o unexpired leases. (All three         | columns of Part B m                                     | ust be completed for each unexpired lease. Attach                    |  |  |
| Property No. 1   |  |   |  |  |  |
| Lessor's Name:   | Describe Leased                        | Property:   | Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ Yes ☐ No |  |  |
| Property No. 2 (if necessary)  |  |   |  |  |  |
| Lessor's Name:   | Describe Leased                        | Property:   | Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ Yes ☐ No |  |  |
| continuation sheets attached (if a   | any)                                   |   |  |  |  |
| I declare under penalty of perjury personal property subject to an und   |  | intention as to an                                      | y property of my estate securing a debt and/or                       |  |  |
| Date: July 17, 2009  | /s/ Julienne Grace Signature of Debtor |   |  |  |  |

Signature of Joint Debtor

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Sassetti, Julienne Grace

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors \_\_\_\_\_12

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: July 17, 2009

/s/ Julienne Grace Sassetti

Debtor

Joint Debtor

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Sassetti, Julienne Grace 13232 Skyline Drive Plainfield, IL 60585 Document Page 38 of 39 Sears Credit Cards PO Box 183081 Columbus, OH 43218-3081

Law Offices Of Steven H. Mevorah & Associates 900 E. Roosevelt Road Lombard, IL 60108 Sears Gold Mastercard PO Box 183082 Columbus, OH 43218-3082

Bank Of America PO Box 17322 Baltimore, MD 21297-1322 Wachovia Dealer Services PO Box 25341 Santa Ana, CA 92799-5341

Carson Pirie Scott PO Box 17254 Baltimore, MD 21297-1264 Washington Mutual PO Box 660487 Dallas, TX 75266-0487

Chase PO Box 15291 Wilmington, DE 19826

Citi Cards PO Box 689105 Des Moines, IA 50368-9105

Discover PO Box 30395 Salt Lake City, UT 84130-0395

GE Money Bank PO Box 960061 Orlando, FL 32896

Good Samaritan Hospital 3815 Highland Avenue Downers Grove, IL 60515

Internal Revenue Service Department Of The Treasury Kansas City, MO 64999-0030

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| IN RE: |  |   | Case No                                |                |          |  |  |
|--------|--|---|--|----------------|----------|--|--|
| Sa     | ssetti, Julienne Grace   |   | Chapter 7                              |                |          |  |  |
|        | De   | btor(s)   |  |                |          |  |  |
|        | DISCLOSURE (   | OF COMPENSATION OF AT   | TORNEY FOR DEBTOR                      |                |          |  |  |
| 1.     | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Roone year before the filing of the petition in bankru of or in connection with the bankruptcy case is as  | ptcy, or agreed to be paid to me, for services r  |  |                |          |  |  |
|        | For legal services, I have agreed to accept  |   |  | \$             | 1,800.00 |  |  |
|        | Prior to the filing of this statement I have received  |   |  | \$             | 1,800.00 |  |  |
|        | Balance Due  |   |  | \$             | 0.00     |  |  |
| 2.     | The source of the compensation paid to me was:   | Debtor Other (specify):   |  |                |          |  |  |
| 3.     | The source of compensation to be paid to me is: Debtor Other (specify):  |   |  |                |          |  |  |
| 4.     | 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  |   |  |                |          |  |  |
|        | I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreeme together with a list of the names of the people sharing in the compensation, is attached.   |   |  |                |          |  |  |
| 5.     | In return for the above-disclosed fee, I have agreed   | to render legal service for all aspects of the ba   | ankruptcy case, including:             |                |          |  |  |
|        | <ul> <li>a. Analysis of the debtor's financial situation, an</li> <li>b. Preparation and filing of any petition, schedule</li> <li>c. Representation of the debtor at the meeting of</li> <li>d. Representation of the debtor in adversary processing the provisions as needed.</li> </ul> | e required;<br>adjourned hearings thereof;  | cy;                                    |                |          |  |  |
| 6.     | By agreement with the debtor(s), the above disclos   | ed fee does not include the following services:   |  |                |          |  |  |
|        | certify that the foregoing is a complete statement of proceeding.  | CERTIFICATION any agreement or arrangement for payment to   | me for representation of the debtor(s) | in this bankru | ptcy     |  |  |
| _      | July 17, 2009  | /s/ Gregory M. Berg   |  |                |          |  |  |
|        | Date   | Gregory M. Berg<br>Law Offices Of Steven H. Mevorah<br>& Associates<br>900 E. Roosevelt Road<br>Lombard, IL 60108<br>(630) 932-9100 Fax: (630) 932-9868<br>GBerg@Mevorahlaw.com |  |                |          |  |  |